

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

Jeff Macy

CASE NUMBER

5:24-cv-00902-KK-SHK

v.

Plaintiff(s)

CSA-18 Special Districts Public Works

Defendant(s).

REQUEST:
ADR PROCEDURE SELECTION

Pursuant to L.R. 16-15, the parties request that the Court approve the following ADR procedure:

- ADR PROCEDURE NO. 1** - The parties shall appear before the magistrate judge assigned to the case *or* the magistrate judge in Santa Barbara for such settlement proceedings as the judge may conduct or direct.
- ADR PROCEDURE NO. 2** - The parties shall appear before a neutral selected from the Court's Mediation Panel.
- ADR PROCEDURE NO. 3** - The parties shall participate in a private dispute resolution proceeding.

Dated: 2/7/25

Jeff Macy

Attorney for Plaintiff


Jeff Macy
in pro per

Dated: _____

Attorney for Plaintiff _____

Dated: _____

Attorney for Defendant _____

Dated: _____

Attorney for Defendant _____

NOTE: If additional signatures are required, attach an additional page to this request.

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO:		FOR COURT USE ONLY
NAME: Jeff Macy		
FIRM NAME:		
STREET ADDRESS: P.O. Box # 103		STATE: CA ZIP CODE: 92391
CITY: Twin Peaks		ZIP CODE: 92391
TELEPHONE NO: (909) 744-8480		FAX NO:
E-MAIL ADDRESS: 1611Bible.us@gmail.com		
ATTORNEY FOR (name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO		
STREET ADDRESS: 247 West 3rd Street		
MAILING ADDRESS: 247 West 3rd Street		
CITY AND ZIP CODE: San Bernardino, CA 92415		
BRANCH NAME: Superior Court of California, County of San Bernardino		
PLAINTIFF/PETITIONER: <i>Jeff Macy</i>		
DEFENDANT/RESPONDENT: <i>CSA-18 Special Districts Public Works</i>		
PROOF OF ELECTRONIC SERVICE		
CASE NUMBER: <i>5:24-cv-00902-KK-SHK</i>		
JUDICIAL OFFICER:		
DEPARTMENT:		

1. I am at least 18 years old.

- My residence or business address is (specify):
P.O. Box # 433, Twin Peaks, CA 92391

- My electronic service address is (specify):
Jerushastar@gmail.com

2. I electronically served the following documents (exact titles):

Request: ADR Procedure Selection

The documents served are listed in an attachment. (Form POS-050(D)/EFS-050(D) may be used for this purpose.)

3. I electronically served the documents listed in 2 as follows:

- Name of person served: Josephine DuSold & Kellie Shin

On behalf of (name or names of parties represented, if person served is an attorney):

CSA-18 Special Districts Public Works

- Electronic service address of person served:
Josephine.DuSold@cc.sbcounty.gov & Kellie.Shin@cc.sbcounty.gov
- On (date): 2/7/25

The documents listed in item 2 were served electronically on the persons and in the manner described in an attachment. (Form POS-050(P)/EFS-050(P) may be used for this purpose.)

Date: 2/7/25

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Jerusha Macy

(TYPE OR PRINT NAME OF DECLARANT)

Jerusha Macy

(SIGNATURE OF DECLARANT)

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